

CONNECTICUT VALLEY HOSPITAL OPERATIONAL PROCEDURE MANUAL

SECTION II: ORGANIZATION-FOCUSED FUNCTIONS POLICY 10: Management of Information PROCEDURE 10.18: Request for Confidential Communication of Protected Health Information

Purpose:

To inform Health Information Management (HIM) staff that patients/personal representatives have the right to receive their requested Protected Health Information (PHI) at alternative locations or by alternative means. HIM staff are required to make reasonable accommodation for the patient in receiving PHI.

Definitions:

1. Individually Identifiable Health Information: Information that is a subset of health information, including demographic information collected from an individual, and that: (1) is created or received by a health care provider, health plan, employer, or health care clearinghouse; and (2) relates to the past, present, or future physical or mental health or condition of an individual, the provision of health care to an individual, or the past, present, or future payment for the provision of health care to an individual, and (3) which identifies the individual, or (4) with respect to which there is a reasonable basis to believe that the information can be used to identify the individual. *Note*: Individually identifiable health information is to be treated as protected health information.
2. Personal Representative: A person who has authority under applicable law to make decisions related to health care on behalf of a patient.
3. Protected Health Information (PHI): Individually identifiable information relating to past, present or future physical or mental health or condition of an individual, provision of health care to an individual, or the past, present or future payment for health care provided to an individual.

Procedure:

1. HIM honors any reasonable request made by patients/ personal representatives in writing for the patient's protected health information to be provided at alternate locations or by alternate means.
2. HIM ensures that the patient/personal representative submits the request for confidential communication in writing using form CVH-184: Authorization for Use and Disclosure of Protected Health Information.

3. HIM will not require an explanation from the patient or personal representative as to the basis for the request as a condition of providing confidential communication of PHI at alternative locations or by alternative means (i.e., fax number, P.O. Box).
4. If HIM determines that the request is unreasonable, HIM will respond to the patient or personal representative in writing on the HIM Processing form (CVH-270) and inform him/her of his/her right to appeal the denial to the CVH Privacy Officer.
5. If the patient chooses to appeal the denial, he/she completes the Request for Appeal of Denial form (CVH-666) which is sent to the Privacy Officer.
6. The Privacy Officer determines whether or not to uphold the denial and provides a written notice to the patient within 30 days using CVH-666.
7. If the denial is upheld, the patient is informed of his/her right to a further review by the Office of Healthcare Information, using CVH-666, Request for Appeal of Denial.
8. HIM staff files the forms CVH-184, CVH-270, and CVH-666 in the Correspondence section of the medical record.

Illustration/Example

Example: A patient/client sends a request to have his lab results faxed to his place of business, rather than sent to his home address. The Hospital determines that this is a reasonable request and therefore faxes the lab results to his place of business.